Fill in this information to identify your case:				
United States Bankruptcy Court for the:				
WESTERN District of WASI	WESTERN District of WASHINGTON			
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13			

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

9 8	rt 1: Identify Yourself			
		About Debtor 1:	, .	About Debtor 2 (Spouse Only in a Joint Case);
1.	Your full name			
	Write the name that is on your	Kalani	*** ***	•
	government-issued picture identification (for example,	First name	. ,	First name
	your driver's license or	Jonathan	* *	•
	passport).	Middle name		Middle name
	Bring your picture	Sease	11/2	
	identification to your meeting with the trustee.	Last name	<u> </u>	Last name
	will life duatee.	Suffix (Sr., Jr., II, III)		Suffix (Sr., Jr., II, III)
439433333				
2.	All other names you		, ş	
	have used in the last 8 years	First name		First name
	Include your married or maiden names.	Middle name	×2	Middle name
		Last name		Last name
		First name	 *3:	First name
		Middle name	· · · · · · · · · · · · · · · · · · ·	Middle name
		Last name	·	Last name
Mattellet				
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0456</u>		xxx - xx
	number or federal	OR		OR _
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	<u> </u>	9 xx - xx

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

De	btor	1
Ų0	DIO	

<u>Kalani Jonathan</u>	Sease
Clear Marris Marris Marris	net blown

Case number (if known)	

		About Debtor 1:	j, etj.	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers	☐ I have not used any business names or EINs.		☐ I have not used any business names or EINs.
	(EIN) you have used in	-Spc Sease, Kalani		
	the last 8 years	Business name		Business name
	include trade names and			
	doing business as names	Business name	₹.	Business name
		4.5049.50 (50)	sar)	
		<u> 1501358670 </u>		
		EIN		EIN
	•	EIN		EIN — — — — — —
		· ·		L41
21012121		PROPERTY OF THE PROPERTY OF TH		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
5.	Where you live			If Debtor 2 lives at a different address:
			3	
		3200 Capital Mall Dr Sw		
		Number Street	5	Number Street
	•			
		Olympia WA 98502		
		City State ZIP Code		City State ZIP Code
		Thurston	rá.	
		County		County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	•		33	
		3200 Capital Mall Dr Sw Apt Ff 203		
		Number Street		Number Street
		P.O. Box	ç	P.O. Box
		1.0.000		F.O. BOX
		Olympia WA 98502	ďź,	
		City State ZIP Code	> . -(.*%)	City State ZIP Code
	······································			
6.	Why you are choosing	Check one:		Check one:
	this district to file for	Over the last 180 days before filing this petition,		Over the less 400 days before Elize this position
	bankruptcy	I have lived in this district longer than in any		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain.	ÀY.	☐ I have another reason. Explain.
		(See 28 U.S.C. § 1408.)		(See 28 U.S.C. § 1408.)
	•			

Official Form 101

Kalani J	onathan
First Manna	N4:1-M- N4

Sease

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Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.			
	are choosing to file under	Chapter 7			
		☐ Cha	oter 11		
		☐ Cha	oter 12		
		☐ Cha	oter 13		
8.	How you will pay the fee	loca your subr with I nec App. By la less pay	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee self, you may pay with cash, cashier's check, or money order. If your attorney is nitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address. In the fee in installments. If you choose this option, sign and attach the feation for Individuals to Pay The Filing Fee in Installments (Official Form 103A). In the fee be waived (You may request this option only if you are filing for Chapter 7, w, a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the other 7 Filing Fee Waived (Official Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	ØNo □Yes.	District		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ø No □Yes.	Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known		
11.	Do you rent your residence?	□ No. ☑ Yes.	Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.		

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Debtor 1	<u>Kalani Jonathan</u>		Sease	Case number (if known)	
	First Name Middle Nar	ne	Last Name		
	•				
Part 3:	Report About Any	Business	es You Own as a S	iole Proprietor	•
12 A re	you a sole proprietor	[[70]No. c	Go to Part 4.		
	ny full- or part-time				
	iness?	☐ Yes.	Name and location of b	ousiness	
	le proprietorship is a				
	ness you operate as an vidual, and is not a		Name of business, if any		
sepa	arate legal entity such as				
a co LLC	rporation, partnership, or		Number Street		
	u have more than one				
sole	proprietorship, use a		<u> </u>	- · · · · · · · · · · · · · · · · · · ·	
	arate sheet and attach it				
to a	is petition.		City	State ZIP Code	
			Check the appropriate	box to describe your business:	
			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
	-		Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))	
		i	Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
			and order	(as defined in 11 U.S.C. § 101(6))	
		l I	arrayarran	* ***	
MARIOMAMARIANA.		<u> </u>	None of the above		**************************************
Cha Ban are deb For a busi	you filing under upter 11 of the ukruptcy Code and you a small business stor? a definition of small mess debtor, see	can set a most recany of the	appropriate deadlines. I ent balance sheet, stat ese documents do not I am not filing under Ch	11, the court must know whether you are a small business of you indicate that you are a small business debtor, you metement of operations, cash-flow statement, and federal inconsist, follow the procedure in 11 U.S.C. § 1116(1)(B). The procedure in 11, but I am NOT a small business debtor according to the court of the procedure.	ust attach your ome tax return or if
11 L	J.S.C. § 101(51D).		the Bankruptcy Code.	•	
		☐ Yes.	l am filing under Chapt Bankruptcy Code.	ter 11 and I am a small business debtor according to the de	efinition in the
Part 4:	Report if You Own	or Have /	Any Hazardous Pro	perty or Any Property That Needs Immediate A	ttention
14. Do 1	you own or have any	ZI No			
pro	perty that poses or is		188-4 :- 4 17		
	ged to pose a threat	₩ Yes.	What is the hazard?		
	ntifiable hazard to				
pub	lic health or safety?				
	io you own any				
	perty that needs nediate attention?		If immediate attention	n is needed, why is it needed?	
	example, do you own				
peris	hable goods, or livestock				
	must be fed, or a building needs urgent repairs?				
ve rest			Where is the property	o.	
			Amere is the broberty	Number Street	
			, v v 1 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	City State	ZIP Code
Official f	Form 101		Voluntary Petition fo	or Individuals Filing for Bankruptcy	page 4

Debtor 1

Kalani Jonathan

Sease

Case number (# known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan if any

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disa

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

through the internet, even after I

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Deb	otor 1 Kalani Jenathan First Name Middle Nam	Sease	Case number (# known)	
	LEST SANITAGE SANITAG	Cast Maille		
Pa	rt 6: Answer These Ques	stions for Reporting Purposes		
	What kind of debts do you have?	16a. Are your debts primarily of as "incurred by an individual pri No. Go to line 16b. Yes. Go to line 17.	consumer debts? Consumer debts a imarily for a personal, family, or househo	re defined in 11 U.S.C. § 101(8) old purpose."
			pusiness debts? Business debts are	
		No. Go to line 16c.	ment or through the operation of the bus	ness of arvesurent.
		Yes. Go to line 17.		
	-	16c. State the type of debts you owe	e that are not consumer debts or busines	ss debts.
·	managan program ang	THE CONTROL OF THE CO		
	Are you filing under Chapter 7?	No. I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses are	Do you estimate that after any exempt per pald that funds will be available to distr	property is excluded and ribute to unsecured creditors?
18.	How many creditors do	2 1-49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000	50,001-100,000
		☐ 200-999	10,001-25,000	More than 100,000
	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
	estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion
	10 De :	□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion □ More than \$50 billion
Pa	rt 7: Sign Below	Be 200 Select O S	CONTROL OF THE PARTY OF THE PAR	
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury that the	information provided is true and
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	r 7, I am aware that I may proceed, if eli lerstand the relief available under each o	gible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed
		If no attorney represents me and I di this document, I have obtained and I	id not pay or agree to pay someone who read the notice required by 11 U.S.C. § :	is not an attorney to help me fill out 342(b).
		I request relief in accordance with th	e chapter of title 11, United States Code	, specified in this petition.
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and 3	ent, concealing property, or obtaining mo fines up to \$250,000, or imprisonment fo 3571.	ney or property by fraud in connection or up to 20 years, or both.
	n	×	x	
		Signature of Debtor 1	Signature of	Debtor 2

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Executed on 07

page 6

MM / DD /YYYY

Executed on

Debtor	1	
Dentu		

Kalani Jonathan

Sease

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attomey for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
	Email address	
Contact phone		

ъ.			
IJ€	מו	or	1

Kalani Jonathan

Sease

Case number (# known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

consequences?	us action with long-term financial and legal
☐ No ✓ Yes	
Are you aware that bankruptcy fraud is a serious of inaccurate or incomplete, you could be fined or into	
☐ No ✓ Yes	
Did you pay or agree to pay someone who is not a	an attorney to help you fill out your bankruptcy forms?
Yes. Name of Person	
	e, Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand have read and understood this notice, and I am a attorney may cause me to lose my rights or prope	ware that filing a bankruptcy case without an
have read and understood this notice, and I am a	ware that filing a bankruptcy case without an
have read and understood this notice, and I am a	ware that filing a bankruptcy case without an erty if I do not properly handle the case.
have read and understood this notice, and I am at attorney may cause me to lose my rights or prope	ware that filing a bankruptcy case without an arty if I do not properly handle the case.
have read and understood this notice, and I am at attorney may cause me to lose my rights or proper Signature of Debtor 1	ware that filing a bankruptcy case without an arty if I do not properly handle the case. Signature of Debtor 2 Date
have read and understood this notice, and I am at attorney may cause me to lose my rights or proper signature of Debtor 1 Date OF OF THE MM / DD / YYYY	ware that filing a bankruptcy case without an arty if I do not properly handle the case. Signature of Debtor 2 Date MM / DD / YYYY

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Fill in this in	formation !	to identify	your case:	
Debtor 1	Kalani		Jonathan	Sease
20210.	First Name		Middle Name	Last Name
Debtor 2				
(Spouse, if filing)	First Name	-	Middle Name	Lest Name
United States E	3ankruptcy C	ourt for the:	WESTERN District	t of WASHINGTON
Case number	(If knowi)	19-4	2273	

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets		
Schedule A/B: Property (Official Form 106A/B)	Your assets Value of what you ow	,> /n
1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>0</u>	
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>11400</u>	
1c. Copy line 63, Total of all property on Schedule A/B	\$_11400	
	<u> </u>	
Part 2: Summarize Your Liabilities		
	Your liabilities Amount you owe	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Page 1 	art 1 of Schedule D	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ <u>_0</u>	
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/	+ \$ <u>11791</u>	
	Your total liabilities \$ 35817	
Part 3: Summarize Your Income and Expenses		
4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I	\$ <u>1390</u>	
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J	\$ <u>3326</u>	
L First successful control of the successful	1944 IV. 6. b. 1. Ib 1880 - 2. Ib. V. o. Secondo contrato contrato contrato contrato de la contrato de la contrato contrato de la contrato della contrato de la contrato della contrato	

Kalani Jonathan	Sease	Case number (if known)
Clare Manager API 10 No	1 141	

P	art 4:	Answer These Questions for Administrative and Statistical Records		
6.	Are you	filing for bankruptcy under Chapters 7, 11, or 13?	·	
	No. Y	ou have nothing to report on this part of the form. Check this box and submit this fo	orm to the court with your other	er schedules.
7.	What kin	d of debt do you have?		
	Your family	debts are primarily consumer debts. Consumer debts are those "incurred by an , or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpos	individual primarily for a persones. 28 U.S.C. § 159.	onal,
	Your this fo	debts are not primarily consumer debts. You have nothing to report on this part orm to the court with your other schedules.	of the form. Check this box a	nd submit
8.	From the Form 122	Statement of Your Current Monthly Income: Copy your total current monthly income: A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$ <u>2400</u>
9.	Copy the	following special categories of claims from Part 4, line 6 of Schedule E/F:		
			Total claim	
	From F	eart 4 on Schedule E/F, copy the following:	S. C.	
	9a. Dome	estic support obligations (Copy line 6a.)	\$ <u>0</u>	
	9b. Taxes	s and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0</u>	
	9c. Claim	s for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0</u>	
	9d. Stude	ent loans. (Copy line 6f.)	s <u> </u>	
		ations arising out of a separation agreement or divorce that you did not report as ty claims. (Copy line 6g.)	s <u>1086</u>	
	9f. Debts	s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$_0	
	9g. Total	. Add lines 9a through 9f.	\$ 1086	

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)
Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

UNITED STATES BANKRUPTCY COURT

WESTER	District Of WASHINGTON
In re Sease, Kalani	Case No.
Debtor	Chapter 7
	OTICE TO CONSUMER DEBTOR(S) OF THE BANKRUPTCY CODE
	Attorney] Bankruptcy Petition Preparer signing the debtor's petition, hereby certify that I delivered to the debtor the Code.
Printed name and title, if any, of Bankruptcy Petition Preparent Address:	rer Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.	
I (We), the debtor(s), affirm that I (we) have receive	ification of the Debtor ved and read the attached notice, as required by § 342(b) of the Bankruptcy
Code. KALANT SEATE	x \$ 07/09/19
1~M1_HIV- (J~Y).16	Signature of Debtor Date
KALANI SEASE Printed Name(s) of Debtor(s)	•

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Debtor 1	Kalani	Jonathan	Sease
	First Name	Middle Name	Lest Name
Debtor 2			
Spouse, if filing)	First Name	Middle Name	Last Name
Jnited States I	Bankruptcy Court for the:	<u>WESTERN</u> District o	# WASHINGTON

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims of exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership ■ Timeshare City ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the portion you own? Manufactured or mobile home entire property? Land Investment property Describe the nature of your ownership Timeshare ZIP Code State interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

Official Form 106A/B

Schedule A/B: Property

What is the property? Check at that apply. Single-family home
Street address, if available, or other description Great address, if available, or other description Duples or multi-unit building Condomistions Who have Claims Secured by Floring Condomistion or cooperative Current value of the current value of the entire property? Condomistion or cooperative Current value of the current value of the entire property? Timestane Describe the nature of your ownershillnterest (such as fee slimple, tenancy the entire feet (such as fee slimple, tenancy the entire (such as fee slimple, tenancy the entired feet of the estate), if know the entired feet of the estate), if know Describe the nature of your ownershill necessary (such as fee slimple, tenancy the entire property? Check one. Describe the nature of your ownershill necessary (such as fee slimple, tenancy the entired (such as fee slimple, tenancy the entired (such as fee slimple, tenancy the entired feet of the estate), if know Describe the nature of your ownershill necessary
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you have attached for Part 1. Write that number here. Describe Your Vehicles
you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 1.1 Make: Make:
you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1. Make: Chevrolett Model: Year: Approximate mileage: 2018 Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Cherrolette Malibu Check if this is community property (see instructions) If you own or have more than one, describe here: 3.2. Make: Who has an interest in the property? Check one. Do not deduct secured claims of exemptions. The amount of any secured claims
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Kalani Jonathan

Sease

Debtor 1

3.3.	First Name Middle Name	Last Name	Case number (##		
3.3.		Cast (Marie			
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	Other information:		☐ Check if this is community property (see instructions)	\$	\$
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Debtor 1

Kalani Jonathan

Sease

Case number (# known)

Do you own or have any legal or eq	ultable interest in any of the following items?	Current value of the
		portion you own? Do not deduct secured claims
6. Household goods and furnishing	,	or exemptions:
Examples: Major appliances, furnit	-	
MANAGED . 1 -		7
Yes. Describe Misc. H	ousehold Goods - Home	\$_1000
7. Electronics		•• ·
	audio, video, stereo, and digital equipment; computers, printers, scanners; music levices including cell phones, cameras, media players, games	
5 7	revices including cell priories, cameras, media piayers, games	
Yes. Describe		S
8. Collectibles of value]
	paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseba	ll card collections; other collections, memorabilia, collectibles	
Yes, Describe		
1		J 3
9. Equipment for sports and hobbid		
and kayaks; carpentry	exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes tools; musical instruments	
∠ No		••••
Yes. Describe		\$
10. Firearms		.i
Examples: Pistols, rifles, shotguns	, ammunition, and related equipment	
☑ No ☐ Yes. Describe		_
annound.		\$
11. Clothes		
No	leather coats, designer wear, shoes, accessories	
Yes. Describe Misc. Cl	othing - Home	\$ 400
]
12. Jewelry		:
Examples: Everyday jewelry, costu gold, silver	ıme jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
☑ No		1
Yes. Describe		\$
13. Non-farm animals		
Examples: Dogs, cats, birds, horse	es ·	
No Yes. Describe		1
konspeciel and the second seco		\$
	old items you did not already list, including any health aids you did not list	
No No		g
Yes. Give specific information		\$
At 10 and	r entries from Part 3, including any entries for pages you have attached	s 1400
	e	\$

Official Form 106A/B

Debtor 1

Kalani Jonathan	Sease	Case number (if known)
Circle Manager Malacetta Manager	Lord Manua	- · · · · · · · · · · · · · · · · · · ·

Describe	Your	Financial	Assets
	ı vu	1 IIIAIIVIAI	Waserd

· · · · · · · · · · · · · · · · · · ·					
Do you own or have any l	egal or equitable interest in a	ny of the following?	The state of the s	in the state of th	Current value of the portion you own?
					Do not deduct secured claims or exemptions.
16. Cash			- 7 3 N N	entrary or linearity is a mand	on on agreet a satisfication to
Examples: Money you h	ave in your wallet, in your hom	e, in a safe deposit box	, and on hand when you	file your petition	
√ 2 No □ ∨os					
Tes				Cash:	\$
17. Deposits of money Examples: Checking, sa and other sir	avings, or other financial accou nilar institutions. If you have mu	nts; certificates of depos ultiple accounts with the	sit; shares in credit union: same institution, list eac	s, brokerage houses, h	
Q Yes		Institution name:			
	47.1 Charling agovert				œ.
	17.1. Checking account:				3
	17.2. Checking account:				\$
	17.3. Savings account:				\$
	17.4. Savings account:				\$
	17.5. Certificates of deposit:				\$
	17.8. Other financial account:				\$
	17.7. Other financial account:				\$
	17.8. Other financial account:		· · · · · · · · · · · · · · · · · · ·		\$
	17.9. Other financial account:				\$
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*******	or publicly traded stocks nvestment accounts with broke	rage firms, money mark	ket accounts		
₩ No					
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					\$
					\$
					\$
	ock and interests in incorpor	ated and unincorporat	ted businesses, includi	ng an Interest In	
an LLC, partnership, a	•				
Yes. Give specific	Name of entity:			% of ownership:	•
information about them					\$ \$
4				%_	\$
					*

Official Form 106A/B

	Kalani Jonat First Name	than Middle Name	Sease Last Name	Case number (#known)	
Vegotiable	<i>instruments</i> in	clude personal che	ner negotlable and non-nego cks, cashiers' checks, promise annot transfer to someone by s	sory notes, and money orders.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
informat	ve specific tion about	Issuer name:			. \$
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			401(k), 403(b), thrift savings ac	counts, or other pension or profit-sharing plan	ns
		Type of account:	Institution name:		
		401(k) or similar plan		<u></u>	<u> </u>
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Your share	Agreements w	deposits you have		e service or use from a company , gas, water), telecommunications	
L. Marrier		1	nstitution name or individual;		
····		Electric: _			· \$
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		Water:			· \$
		Rented furniture: _			· \$

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

₩ No

Yes...... Issuer name and description:

Official Form 106A/B

		<u>nathan</u>	Sease	Case number (if known)	
	First Name	Middle Name	Last Name		
	e in on aducat	ion IBA In on a	account in a qualified ADI E w	rogram, or under a qualified state tuition pr	
		, 529A(b), and 5		rogram, or under a qualified state toldon pr	ogram.
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<u>J</u> Yes	***************************************	Institution	on name and description. Sepa	rately file the records of any interests.11 U.S.C	;, § 521(c):
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					 \$
xercisa No	equitable or fu able for your b . Give specific	uture Interests i penefit	n property (other than anyth	ing listed in line 1), and rights or powers	
	mation about th	hem			\$
			de secrets, and other intelled		
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	Give specific				
infor	mation about the	hem			\$
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x <i>ample</i> No Yes.		mits, exclusive li	_	on holdings, liquor licenses, professional license	es \$\$
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No Yes. infor	es: Building per Give specific mation about th	hem	icenses, cooperative association	on holdings, liquor licenses, professional license	\$
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30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,

Social Security benefits; unpaid loans you made to someone else

∠ No

Official Form 106A/B

Yes. Give specific information.....

page 7

Debtor 1	Kalani Jonathan	Sease	Case number (if known)	
	First Name Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
	NACO			THE CONTRACT OF THE PARTY OF TH

	in insurance policies	se: health sovings account (USA):	credit, homeowner's, or renter's insurance	
	Health, disability, of the insuran	e, neam savings account (HSA),	credit, nomeowners, or remers insurance	
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	ame the insurance company	Company name:	Beneficiary:	Surrender or refund value:
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			ce policy, or are currently entitled to receive	
	ecause someone has died.	speed processes from a first modificity	oc policy, of the currently challed to receive	•
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PPROGRAMO.	sive specific information			7
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-		not you have filed a lawsuit or n	• -	İ
	· Accidents, employment dispute:	s, insurance claims, or rights to su	9	
V No	!			
Yes. D	escribe each claim			
	1			J \$
		s of every nature, including cou	interclaims of the debtor and rights	
to set off	cjaims			
Constitution (
Yes. D	escribe each claim			5
	\$ <u></u>			
35. Any finan	cial assets you did not already	list		
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**********	Sive specific information			
				\$
	-		ries for pages you have attached	
for Part 4.	, write that number nere			\$
nater of the national property to	ALALAN SEEVAANA AANAA	www.da.b.sec.co.co.co.co.co.co.co.co.co.co.co.co.co	MARINANANANANANANANANANANANANANANANANANAN	adda www.mgammagagagagagagagagagagagagagagagagag
Part 5:	escribe Any Business-F	lelated Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
		<u> </u>		
		le interest in any business-relat	ed property?	
💋 No. Go	to Part 6.			
🔲 Yes. G	io to line 38.			,
				Current value of the
				portion you own?
				Do not deduct secured claims
				or exemptions.
	receivable or commissions yo	u already earned		
Z No				
🔲 Yes. D	escribe			
***************************************				\$
39. Office ear	ipment, furnishings, and supp	lies		•
			nes, rugs, telephones, desks, chairs, electronic devices	
Z No	·			
	escribe			
kalilasi 196. D				P

Debtor 1	Kalani Joi		Sease	Case number (# known)	
	First Name	Middle Name	Last Name		.
	 .				
40. Machine	ry, fixtures, e	quipment, sup	olles you use in busine	ss, and tools of your trade	
√ No					
Water and the same of the same	 [waren a second
Tes.	Describe				\$
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41. Inventor	y				
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	ın harmatatı	ibs or louir seu	tures		
V No					
Yes.	Describe	Name of entity:		O/ of our continu	
**********		Name or entity.		% of ownership:	
				%	\$
				<u> </u>	\$
					T
					Þ
43 Custome	er lists, mailin	g lists, or othe	r compilations		
√ No					-
Yes	Do your lists	include persor	nally identifiable Inform	nation (as defined in 11 U.S.C. § 101(41A))?	
war.	MEMANAN.	ordao porco.	iany identificable intern	lation (as defined in 11 0.0.0. § 101(41/))1	
200	☐ No	\$*************************************			
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44 Any husi	hatelor.seani	nronerty you d	id not aiready list	•	
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45. Add the	dollar value o	of all of your en	tries from Part 5, inclu	ding any entries for pages you have attached	. 0
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Part 6:	Describe A	v Farm- and	Commercial Fishing	j-Related Property You Own or Have an Interest	in_
	If you own or	have an intere	st in farmland, list it in	Part 1.	
	, = 2 = 2000 01	wii misel s			
				<u> </u>	
		ny legal or equ	itable interest in any fa	rm- or commercial fishing-related property?	
	o to Part 7.				i
	Go to line 47.				
t one					
					Current value of the
			,		portion you own?
					Do not deduct secured claims
					or exemptions
47. Farm ani					
	s: Livestock, p	oultry, farm-rais	ed fish		
√ No				_	
Processorié.					······································
tu Yes			,		
	,				
	L	ne en e			\$

Kalani Jonathan

Sease

Schedule A/B: Property

000001	Kalani Jonathan	Sease	Case number (if known)	
	First Name Middle Name	Last Name		
48. Crops—eitl	er growing or harvested			
Yes. Gi	e specific	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	ionshing equipment, impleme	nts machinery fixtu	roe and tools of trado	\$
Ø No	- ·			normania n'artificazione e
Q Yes	And the second s			\$
	shing supplies, chemicals,	and feed		
Ø No □ Yes				
NOTION OF THE PARTY OF THE PART				\$
51. Any farm- a	nd commercial fishing-rela	ted property you did	not already list	
Yes. Gi	re specific	ng girin kafan kalangan Palaya da kanda kanan manan da ana da da kalan da kanda kanda da da da da da da da da d		
	L	ies from Part 6, inclu	iding any entries for pages you have attached	
			ming any encies for pages you have attached	→ [^{\$}
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Part 7: D	scribe All Property	ou Own or Have	an Interest in That You Did Not List A	bove
	e other property of any kin eason tickets, country club memb		y list?	
Ø No □ Vas G	/e specific			\$
BALLACIA AND	on			\$
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54. Add the do	lar value of all of your entr	ies from Part 7. Write	that number here	→ \$ <u>0</u>
** - * ********************************	ggall Martin VII also summere evenere sors, en 1. sas estas sussessimente	and the second section of the second	** A PARTABURAR A Made distributed de la company de la com	en a mari e di mari di e di
Part 8: Li	st the Totals of Each	Part of this For	m	
55. Part 1: Tota	real estate, line 2			> \$_0
56. Part 2: Tota	l vehicles, line 5		\$	** * * * * * * * * * * * * * * * * * *
57. Part 3: Tota	l personal and household i	tems, line 15	\$ <u></u>	
58. Part 4: Tota	I financial assets, line 36		\$	
59. Part 5: Tota	l business-related property	, line 45	\$ <u></u>	•
60. Part 6: Tota	farm- and fishing-related	property, line 52	\$ <u>_0</u>	

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61.

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

11400

\$_11400

Copy personal property total 👈

Official Form 106C Schedule C: The Property You Claim as Exempt Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If mon space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each Item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to st specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amo of any applicable statutory limit. Some exemptions—such as those for health alds, rights to receive certain benefits, and tax-exempty retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that you claim as exempt, fill in the information below. Copy the value from Schedule A/B 2018 Chexrolette Melifus				dentify your case:	information to ide	Fill in this i
Debtor 2 (\$\text{Geoute} if filling) \text{First Name} \text{Mode Name} \text{Lot risens} United States Bankruptcy Court for the: \text{WESTERN District of WASHINGTON} Case number of fill nown) Official Form 106C Schedule C: The Property You Claim as Exempt Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information Using the property you listed on \$Schedule AB: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If mon space is needed, fill out and attach to this page as many copies of \$Part 2: Additional Page as necessary. On the top of any additional pages, writy your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to six specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amo of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law tha limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you llist on Schedule A/B that you claim as exempt, fill in the Information below. Brief description of the property and line on Current value of the profice you own Check only one box for each exemption. Schedule A/B that lists this property				Jonathan	Kalani	
Case number Check if finown						
Official Form 106C Schedule C: The Property You Claim as Exempt Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If mon space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, writ your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to st specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amo of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law tha limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions, 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the Information below. Brief description of the property and line on Current value of the profion you own Copy the value from Schedule A/B that lists this property.						
Official Form 106C Schedule C: The Property You Claim as Exempt Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information by space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, writivour name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to ste specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amo of any applicable statutory limit. Some exemptions—such as those for health alds, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions, 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/8 that you claim as exempt, fill in the Information below. Brief description of the property and line on Schedule A/8 that go claim as exempt, fill in the Information below. Brief description of the property and line on Schedule A/8 that go claim as exempt, fill in the Information below.		ON	strict of <u>WASHING</u> TO	t for the: WESTERN D	es Bankruptcy Court fo	United States
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Dilei	claim Specific laws that allow exemption	Amount of the exemption you claim Check only one box for each exemption.	Current value of the portion you own	property and line on this property	description of the p	Brief de
Line from Schedule A/B: any applicable statutory limit	claim Specific laws that allow exemption	Amount of the exemption you claim Check only one box for each exemption.	Current value of the portion you own Copy the value from Schedule A/B	property and line on this property	description of the p dule A/B that lists th 2018 Chev	Brief de Schede Brief
Misc. Household Goods Brief description: \$1000	claim Specific laws that allow exemption Amption. 11usc522(d)(10)(a); up to	Amount of the exemption you claim Check only one box for each exemption. \$\$ 100% of fair market value, up to	Current value of the portion you own	property and line on this property	description of the policie A/B that lists the 2018 Chevotion:	Brief de Schedu Brief descript Line froi

3. Are you claiming a homestead exemption of more than \$170,350?

Misc. Clothing

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

☑ No

Line from

description:

Line from

Brief

Schedule A/B:

Schedule A/B:

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

Yes

Official Form 106C

Schedule C: The Property You Claim as Exempt

4 100% of fair market value, up to

any applicable statutory limit

2 100% of fair market value, up to

any applicable statutory limit

page 1 of ___

11nsc522(d)(10)(a):

Debtor 1

Kalani J	onathan	Sease	Case number (#known)
itst Name	Middle Name	Lest Name	

art 2:	Additional	Page
		rayo

on Schedule A/B th	the property and line at lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exempt
		Copy the value from Schedule A/B	Check only one box for each exemption	, , , , , , , , , , , , , , , , , , ,
Brief Jescription: —		\$	□ \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription: —	•	\$	□ s	
ine from Schedule A/B: ——			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription:		\$	<u> </u>	
ine from Schedule A/B: ——			☐ 100% of fair market value, up to any applicable statutory limit	
irief escription: ——		\$	D \$	
ine from Schedule A/B:	*****		☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	□ \$	
ine from chedule A/B: ——			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —	· · · · · · · · · · · · · · · · · · ·	\$	□ \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	□ \$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	□ s	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	- \$	
ine from chedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	- \$	
ine from Schedule A/B:	·····	· · · · · · · · · · · · · · · · · · ·	☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: —		\$	Q \$	
ine from Schedule A/B: ——			☐ 100% of fair market value, up to any applicable statutory limit	
Brief lescription: ——		\$	□ s	······································
ine from Schedule A/B:	_		☐ 100% of fair market value, up to any applicable statutory limit	

Official Form 106C

			_	
Fill in this information to identify your ca	se:			
Deptor 1	ithan Sease			
First Name Middle Debtor 2	Name Last Name			
(Spouse, if filing) First Name Middle	Name Last Name		·	
United States Bankruptcy Court for the: WESTE	RN District of WASHINGTON			
Case number				
(if known)			—	if this is an
			amende	ed filing
Official Form 106D				
		1	-	
Schedule D: Creditor	s Who Have Claims Secur	ea by Proj	регту	12/15
Be as complete and accurate as possible	. If two married people are filing together, both are early the Additional Page, fill it out, number the entries,	qually responsible f	or supplying correc	t
additional pages, write your name and ca		and attach it to this	tolini. On the top of	ally
Do any creditors have claims secured I No. Check this how and submit this for	by your property? m to the court with your other schedules. You have noth	ing also to report on	thin form	
Yes. Fill in all of the information below		ing eise to report on	uns torm.	
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	•			
Part 1: List All Secured Claims				
	. hov. 45 yr. 37 37 48 47 47 47 47 47 47 47 47 47 47 47 47 47	Golumn A	Column B	Column C
2. List all secured claims. It a creditor has for each claim. If more than one creditor.	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collateral	Unsecured
	habetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Capital One Auto Finance	1			
Creditor's Name	Describe the property that secures the claim:	\$ <u>24026</u>	\$_10000	\$ <u>14026</u>
Credit Bureau Dispute	2018 Chevrolette Malibu	· ·		
Number Street	-			
Po Box 259407	As of the date you file, the claim is: Check all that apply.			
	Contingent Unliquidated			
Plano TX 75025 City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured	•		
Debtor 2 only	car loan)	•	• .	
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Undgment lien from a lawsuit ☐ Other (including a right to offset) Auto Loan			
☐ Check if this claim relates to a	Coner (including a right to onset)	-		
community debt Date debt was incurred June 2018	Last 4 digits of account number			
2.2		\$	\$	**************************************
Creditor's Name	Describe the property that secures the claim:	T	. Ψ	*
Number Street			•	
	As of the date you file, the claim is: Check all that apply Ontingent			
	☐ Unfiquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of ilen. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax llen, mechanic's lien) Judgment lien from a tawsuit			
At least one of the debtors and another	Other (including a right to offset)		-	
Check if this claim relates to a		-		
community debt Date debt was incurred	Last 4 digits of account number			
	Column A on this page, Write that number here:	\$ <u>24026</u>		
•				

Official Form 106D

Debtor 1	Kalani	Jonathan	Sease
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	WESTERN District of	WASHINGTON

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecur	ed Claims			_
 Do any creditors have priority unsecured claim No. Go to Part 2. Yes. List all of your priority unsecured claims. If a circle. 	s against you? Editor has more than one priority unsecured claim, list the	ne creditor s	Separately for e	ạch claim. For
each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	a claim has both priority and nonpriority amounts, list if claims in alphabetical order according to the creditor's near 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim hei ame. If you	re and show bo have more tha	th priority and n two priority
		Total cla		Nonpriorit amount
Priority Creditor's Name	Last 4 digits of account number	\$	<u> </u>	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply	/ .		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed			
Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were 	•		
Is the claim subject to offset? ☐ No ☐ Yes	intoxicated Other. Specify	-		
Priority Creditor's Name	Last 4 digits of account number	\$	<u> </u>	\$
Number Street	When was the debt incurred?			
·	As of the date you file, the claim is: Check all that apply Contingent	<i>t</i> .		
City State ZIP Code Who incurred the debt? Check one.	Unliquidated Disputed			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim: Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
Is the claim subject to offset?	intoxicated Other. Specify	-		

Debtor 1

Kalani Jonathan
First Name Middle Name

Sease

Case number (if known)______

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

or listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	·			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other Specify			
Is the claim subject to offset?				
□ No □ Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
☐ Debtor 1 only	Type of PRIORITY unsecured claim:	-		
Debtor 2 only	Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	·		
	Other. Specify			
Is the claim subject to offset?				
Yes		- -	_	***************************************
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	- Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:	-		
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	CARCOCOMINETE AZTORE O TREBUTA CARCOCOMINA DO CONTROLO COME		######################################
Is the claim subject to offset?				
☐ No				
Yes				and the same of

Debtor 1

Kalani Jonathan Sease
First Name Middle Name Last Name

Case number	(if known)			

_				
Part 2:	List All of	Your NONPRIORITY	' Unsecured	Claim:

3. "	Do any creditors have nonpriority unsecured claims against you	?	
	No. You have nothing to report in this part. Submit this form to the		
Γ	Yes	. abast with your other soricadies.	
	##### \$256 6766		.10 L
4: 1	ist all of your nonpriority unsecured claims in the alphabetical (order of the creditor who holds each claim. If a creditor has	more than one.
`	nonpriority unsecured claim, list the creditor separately for each claim	. For each claim listed, identify what type of claim it is. Do not	list claims already
	included in Part 1. If more than one creditor holds a particular claim, I	ist the other creditors in Part 3.If you have more than three no	npriority unsecured
•	claims fill out the Continuation Page of Part 2.		· 3/1 ·
			Total claim
.1	Bull City Financial Solutions	Land & dimits of account womber	
	Nonpriority Creditor's Name	Last 4 digits of account number	s 415
	2609 N. Duke St. Ste 500	When was the debt incurred? Feb 2016	<u> </u>
	Number Street		
	Durham NC 27704	A state of the sta	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	□ Dishared	
		Town of MONIBOLOBITY and a second of the	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Contect in this caulit is for a confillment's dept	that you did not report as priority claims	
	is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	Ú No	✓ Other. Specify _Utilities	
	☐ Yes		
.2	Credit One Bank	Last 4 digits of account number	\$ 450
	Nonpriority Creditor's Name	When was the debt incurred? March 2019	
		When was the dept incurred? March 2019	
	6801 S. Cimarron Road		
	Number Street	As a fish a data as a fill of a ship	
	Las Vegas NV 89113	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
		☐ Disputed	
	Debtor 1 only	- Disputed	
	Debtor 2 only	Tune of NONDRIGHTY unecount alsima	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	The	Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	,
	☑ No	✓ Other. Specify <u>Credit Card</u>	
	Yes		
 -			**************************************
.3	Finwise/opploans	Last 4 digits of account number	
	Nonpriority Creditor's Name		\$ <u>1500</u>
	626 Rxr Plaza Suite 600	When was the debt incurred? April 2019	
	Number Street		
	Uniondale NY 11553 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code		
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	_		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	_ '	
	•	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	2 No	Other. Specify Personal Loan	1
	Yes	W Oner, specify refsonariouni	200000
	•		

Sease

Case number (if unown)_____

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

•		
Harris Originals Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>2642</u>
Nonpriority Creditor's Name 800 Prime Place	When was the debt incurred? October 2014	
Number Street	As of the date was file the plains by Charle all that and	
Hauppauge NY 11788	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
•	☐ Disputed	
☑ Debtor 1 only ☑ Debtor 2 only	Time of MANDDIARITY	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
- variety of the deptots and shother	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Installment Loan	
2 No	- Caron openia <u>Austrimient Poet</u>	
Yes		
Iq Data International In	Last 4 digits of account number	\$ <u>1086</u>
Nonpriority Creditor's Name	— June 2019	
1010 Se Everett Mall Way	when was the debt incurred y	
	As of the date you file, the claim is: Check all that apply.	
100 Everett WA 98208 City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	•	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Collection	
2 No		
☐ Yes		
Military Can	Last 4 digits of account number	\$ <u>1150</u>
Military Star Nonpriority Creditor's Name		
3911 S Walton Walker Blvd	When was the debt incurred? October 2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
Dallas TX 75265-0410 State ZIP Code	Contingent	
· Come on case	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify Credit Card	
⊠ No	The Otton Short Anna Service An	
□ No		

Debtor 1

Kalani Jonathan

Sease

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

6a. Domestic support obligations

government

- 6b. Taxes and certain other debts you owe the
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.
- Total claims from Part 2
- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

6a.

- 6b.

- 6e.
 - Total claim
- 6f.
- 1086 6g
- 6h.
- 6i.
- 10705
- 6j. 11791

Part 2.	Part	2:
---------	------	----

Your NONPRIORITY Unsecured Claims — Continuation Page

W . E. J. 10	Last 4 digits of account number	
Navy Federal Cu Nonpriority Creditor's Name	_	\$ <u>2193</u>
	When was the debt incurred? October 2014	
One Security Place Number Street	_	
Merrifield VA 22119	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Miles insurand the dahed Charles-	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Two of NONDRIGHT (
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
── ✓ reast one of the debtors sud suctuel. ──	Obligations arising out of a separation agreement or divorce that	
Check If this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify <u>Credit Card</u>	
No.	- descriptions of the control of the	
☐ Yes		
A THE CONTRACT OF THE CONTRACT		A488
Sunrise Credit Services	Last 4 digits of account numberXXXX	s_2055
Nonpriority Creditor's Name	When was the debt incurred? May 2019	
234 Airport Plaza Blvd Ste 4	Fileti Was die deut liicutted t	
Number Street	As of the date you file, the claim is: Check all that apply.	
Farmingdale NY 11735 City State ZIP Code		
Citate Air Cour	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Collection	
Ø No		
Yes		
		\$300
Thom - Milestone	Last 4 digits of account number	+ <u>.200</u>
Nonpriority Creditor's Name		
216 W 2nds St	veneri was the dept incurred? NIALCH 2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
Dixon MO 65459 City State ZIP Code		
State ZIP Code	Contingent Unitiouldated	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	<u></u>	
At least one of the debtors and another	 □ Student loans □ Obligations arising out of a separation agreement or divorce that 	
Object Materials to the second of the second	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify Credit Card	
Ú №		
☐ Yes		

7 11	in this in	formation to	identify your c	ase:				
	V	alani			Sease			
Del	otor 🔼	First Name	- Jonat	han e Name	Last Name			
	otor 2 ouse if filing)	First Name	Midd	e Name	Last Name	· · · · · · · · · · · · · · · · · · ·		
Uni	ted States I	Bankruptcy Cou	irt for the:WESTE	RNoistric	ct of <u>WASHI</u> NGTO	N		
	se number							Check if this is an
<u> </u>	-					· · · · · · · · · · · · · · · · · · ·		amended filing
~	C: _ : _ I	40	00					
		orm 10		_		_		
Sc	hedu	ule G:	Executo	ry C	ontracts	and	Unexpired Leases	12/15
info	rmation. I	f more space		y the ad	ditional page, fill it o		gether, both are equally responsible for supply umber the entries, and attach it to this page. On	
1	Do you h	ave anv eve	cutory contracts	e or line	vnirad laseas?			
	12 No. C	heck this box	and file this forn	n with the	court with your othe		dules. You have nothing else to report on this form.	
	Yes. I	Fill in all of the	e information bel	ow even	if the contracts or lea	ses an	e listed on <i>Schedule A/B: Property</i> (Official Form 10	6A/B).
		rent, vehicle					ract or lease. Then state what each contract or le n in the instruction booklet for more examples of ex	
	Person o	r company v	vith whom you i	nave the	contract or lease		State what the contract or lease is for	\$4
2.1				117.	* * *			
	Name						-	
ind Auto metales	Number	Street	- 1				-	
ederican artanomi	City						_	
2.2	City		State	ZIP Cod		escolator Schales (centre)		
2.2	Name						-	
od ex v comorever	Number	Street					<u>-</u>	
-	IACHIDO	Street	-				_	
2.3	City	Монсонались этом по монициос ности ство дреди	State	ZIP Cod		************************		esycandorographical de la respectación de la respec
	Name						_	
***************************************	Number	Street			····		-	
TO THE WAY COMME		0.1001					_	
2.4	City		State	ZIP Cod	 	(Lilly through the total		i pinaka interpresident katalogi sakata sakata sakata katalogi kana katalogi sakata sakata sakata sakata sakat
	Name						-	
named on the same	Number	Street					-	
and an an and an an and							_	
2.5	City		State	ZIP Cod	le managaring and a superior and a s	SANSON CORNEL SANS		
2.0	Name						-	
As declarated rea	Number	Street					-	
-		Ou det	41				_	
į	City		State	ZIP Cod				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

_		
Dθ	otor	1

Kalani Jonathan		Sease	Case number (if known)
icst Name	Middle Name	Last Name	

Dept	ior 1	Naiani Jonati	nan	Sease	Case number (if known)
		First Name M	Addle Name	Last Name	
		Additional Ba	na if Van U	ave More Contracts or Leas	
٠.,		Augitional Pa		ave more Contracts of Leas	es Pode 3006-766 (7655 - 2669) - 400 (7597) - 2655 - 2665 - 7
	Person			have the contract or lease	
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2.6					
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Official Form 106G

City

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ZIP Code

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Information. If more space is needed, copy the Additional Page, fill it of Page to this page. On the top of any Additional Pages, write your name either spouse as a codebtor.) ate or territory? (Community property states and territories include co, Texas, Washington, and Wisconsin.)
ate or territory? (Community property states and territories include

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

ZIP Code

State

Number

City

Column 1:	Your codebtor		Column 2. The creditor to whom you owe the debt
		No.	Check all schedules that apply:
Name			☐ Schedule D, line
			Schedule E/F, line
Number	Street		Schedute G, line
City	State	ZIP Code	V 999 91. http://doi.org/state
3.2			☐ Schedule D, line
Name			Schedule E/F, line
Number	Street		☐ Schedule G, line
City	State	ZIP Code	
1.3			D • · · · · · · · · ·
Name			Schedule D, line
			☐ Schedule E/F, line
Number	Street		☐ Schedule G, line

Official Form 106H

Schedule H: Your Codebtors

page 1 of ____

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D	•	⋈	•	4

Kalani Jonathan

Sease Last Name

Case number	' (if known)

	Column 1: Your codebtor			Column 2 The creditor to whom you owe the debt	
	COMMIT I. TOUI COURSIUS	Na	7.0		
3	,		``	Check all schedules that apply:	
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	Name			☐ Schedule E/F, line	
	Number Street			☐ Schedule G, line	
	City	State	ZIP Code		
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	Number Street	·		Schedule G, line	
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	City	State	ZIP Code		
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	Name			Schedule D, line	
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	Name		· · · · · · · · · · · · · · · · · · ·	☐ Schedule D, line	
				Schedule E/F, line	
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3		State	ZIP Code	Vacantarian est a missa consissament en format de la complación de la Maria (Maria Maria Maria Complación de la Complació	
	Name			☐ Schedule D, line	
				Schedule E/F, line	
	Number Street	<u> </u>		Schedule G, line	
	-				
	City	State	ZIP Code		

Official Form 106H

	-		•	–		
Debtor 1	Kalani First Name	Jonathan S	CASC Last Name	.		
Debtor 2	First Mainte	mittae resilie	Cest Name	_		
	ng) First Name	Middle Name	Last Name			
Jnited State	es Bankruptcy Court for the:	WESTERN District of WA	ASHINGTON			
Case numbe	er			Check if thi	is is:	
,				An ame	~	
	-				lement showing postpetition chap as of the following date:	iter 13
fficial f	Form 106I	-		MM / DD	D/ YYYY	
iche	dule I: You	ır Income			12	<i>y</i> 15
you are s	eparated and your spot	use is not filing with you top of any additional pa	, do not include information	on about your spou	ou, include information about your se. If more space is needed, attach nown). Answer every question.	
Fill in yo	our employment ition.		Debtor 1		Debtor 2 or non-filling spouse	
attach a	ave more than one job, separate page with tion about additional ars.	Employment status	Employed Not employed		Employed Not employed	
	part-time, seasonal, or ployed work.		Security	•		
	tion may include student emaker, if it applies.	Occupation	bearty			
		Employer's name	G4S Security Solution	18		
		Employer's address	16300 Christensen Ro Tukwila, WA 98188 Number Street	oad, Suite 130,	Number Street	
			- Canada Gasar			
	•		City State	ZIP Code	City State ZIP Co	de
		How long employed th	City State	ZIP Code	City State ZIP Co	de
Part 2:	Give Details Abou		City State	ZIP Code	City State ZIP Co	de
spouse of the sp	e monthly income as of unless you are separated your non-filing spouse h	t Monthly Income the date you file this for ave more than one employ	City State 1 year 1 year rm. If you have nothing to re yer, combine the information	eport for any line, writ	te \$0 in the space. Include your non-t	
Estimate spouse of the spouse	e monthly income as of unless you are separated your non-filing spouse h	t Monthly Income the date you file this for	City State 1 year 1 year rm. If you have nothing to re yer, combine the information	eport for any line, writ	te \$0 in the space. Include your non-t	
Estimate spouse of lifyou or below. If	e monthly income as of unless you are separated your non-filing spouse h i you need more space, a onthly gross wages, sal	t Monthly Income the date you file this for ave more than one employ	City State Pere? 1 year Trm. If you have nothing to recombine the information this form.	eport for any line, writ	te \$0 in the space. Include your non-t r that person on the lines	
Estimate spouse used if you or below. If	e monthly income as of unless you are separated your non-filing spouse h i you need more space, a onthly gross wages, sal	t Monthly Income I the date you file this for the date you file this for the date when one employed act as separate sheet to lary, and commissions (I calculate what the month)	City State Pere? 1 year Trm. If you have nothing to re Eyer, combine the information this form. Defore all payroll by wage would be. 2.	eport for any line, writ n for all employers for For Debtor 1	te \$0 in the space. Include your non-t r that person on the lines	

Official Form 106I

			For Debtor		For Debtor 2 or non-filling spouse		
C	opy line 4 here	4.	\$ <u>2400</u>		\$	_	
5. Li s	st all payroil deductions:						
5	ia. Tax, Medicare, and Social Security deductions	5a.	\$ <u>300</u>	_	\$		
5	b. Mandatory contributions for retirement plans	5b.	\$ <u>50</u>		\$		
5	c. Voluntary contributions for retirement plans	5c.	\$ <u>60</u>		\$		
5	d. Required repayments of retirement fund loans	5d.	\$ <u>0</u>	_	\$	-	
5	ie. Insurance	5e.	\$ <u>200</u>		\$		
5	if. Domestic support obligations	5f.	\$ <u>0</u>		\$		
5	g. Union dues	5g.	\$ <u>200</u>		\$	_	
5	h. Other deductions. Specify: Family Care	5h.	+\$ <u>200</u>		+ \$	-	
6. A	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ <u>1010</u>		\$	-	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1390</u>		\$	-	
8. L	Ist all other income regularly received:						
8	 Net income from rental property and from operating a business, profession, or farm 						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>0</u>		\$		
. 8	3b. Interest and dividends	8b.	\$ 0		S		
	Bc. Family support payments that you, a non-filing spouse, or a depende regularly receive		<u> </u>	•	-	•	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u>0</u>		\$	-	
٤	d. Unemployment compensation	8d.	\$ <u>0</u>		\$		
	Be. Social Security	8e.	\$ <u>0</u>		\$	_	
	3f. Other government assistance that you regularly receive Include cash assistance and the value (If known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ce					
	Specify:	8f.	\$ <u>0</u>		\$	-	
8	g. Pension or retirement income	8g.	\$ <u>0</u>		\$		
8	3h. Other monthly income. Specify:	8h.	+ \$ 0		+\$		
9. 🗚	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_0	֓֞֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֡֓֓֓֡֡֡֡֓֓֡֡֡֜֝֡֓֡֓֡֡֡֡֡֡֡֡	\$	_	
	alculate monthly Income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>1390</u>	+	\$	_	\$ <u>1390</u>
11. S	tate all other regular contributions to the expenses that you list in Sched	lule J	r_		<u>-</u>		
fri	clude contributions from an unmarried partner, members of your household, y lends or relatives.						
	o not include any amounts already included in lines 2-10 or amounts that are i pecify:	not av	allable to pay expe	nses ——		1. +	\$ <u>0</u>
	dd the amount in the last column of line 10 to the amount in line 11. The				-	_	\$ 1390
W	Irite that amount on the Summary of Your Assets and Liabilities and Certain S	tatisti	ca <i>l intormation</i> , if it	appl	lies 1:	۷.	Combined
	o you expect an increase or decrease within the year after you file this f	orm?			-		monthly income
	Yes. Explain:			• • • • • • • • • • • • • • • • • • • •			

Official Form 106I Schedule !: Your Income page 2

tion to identify	your case:			
ne me otcy Court for the:	Jonathan Sease Middle Name Last Name Middle Name Last Name	An ame	ended filing element showing poses as of the follow	•
	ur Expenses			12/15
accurate as po space is neede every question.	essible. If two married people are fill ad, attach another sheet to this form			
2. btor 2 live in a s Debtor 2 must file	•	eparate Household of Debtor 2.		
	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's	s Does dependent live with you?
ependønts'		Mother Brother		No Yes No Yes No Yes No Yes No Yes No Yes
ole other than	No Yes			The second secon
nses as of your ite after the ban aid for with non d have included me ownership e	bankruptcy filing date unless you a kruptcy is filed. If this is a supplement e-cash government assistance if you it on Schedule I: Your Income (Offi	ental Schedule J, check the book know the value of cial Form 106I.)	ex at the top of the t	form and fill in the
	nie ptcy Court for the: 106J 106J 2 J: You accurate as por space is neede every question. ribe Your Houre? 2. btor 2 live in a september of and expendents? 1 and expendents' te Your Ongoinses as of your the after the band of a with nor dependent of a point of a po	Middle Name Middle Name Lest Name MASHINGTO District of WASHINGTO A 106J District of WASHINGTO Lest Name Lest Name Lest Name WASHINGTO Lest Name Lest N	Check if the second state of the second state	In Jonathan Sease Mode Name Lat Name Lat Name An amended filing A supplement showing properties as of the follow MM / DD / YYYY A supplement showing properties as of the follow MM / DD / YYYY A supplement showing properties as of the follow MM / DD / YYYY In 106J P J: Your Expenses Inaccurate as possible. If two married people are filing together, both are equally responsible for supering a season In 106J P J: Your Expenses In 106J P J: Your Household In 106J P J: Your Household In 2 J: Your Household In 2 J: Your Household In 2 J: Your Household In 3 J: Your Household In 2 J: Your Household In 3 J: Your Household In 106J P J: Your Household In 2 J: Your Household In 3 J: Your Household In 3 J: Your Household In 4 J: Your Household In 5 J: Your Orgoling Monthly Expenses In 106J P J: Your Household In 106J P J: Your Househol

Official Form 106J

Schedule J: Your Expenses

Debtor 1

Kalani Jonathan
First Name Middle Name

Sease Lust Name

Case number (if known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$ <u>-0</u>
ъ.	Utilities: 6a. Electricity, heat, natural gas	e-	_{\$} 100
	,, ,	6a.	\$ \$_45
	6b. Water, sewer, garbage collection	6b.	\$ 230
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 300
	6d. Other. Specify: Rent A Center	6 d.	
7.	Food and housekeeping supplies	7.	\$ <u>120</u>
8.	Childcare and children's education costs	8.	\$ <u> </u>
9.	Clothing, laundry, and dry cleaning	9.	\$ <u>20</u>
10.	Personal care products and services	10.	<u>\$_40</u>
11,	Medical and dental expenses	11.	<u>\$ 50 </u>
12.	Transportation. Include gas, maintenance, bus or train fare.		\$ 0
	Do not include car payments.	12.	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$_10
14.	Charitable contributions and religious donations	14.	\$_10
15.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$ <u>0</u>
	15b. Health insurance	15b.	\$ <u>100</u>
	15c. Vehicle insurance	15c.	<u>\$_200</u>
	15d. Other insurance. Specify:	15d.	\$_0
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		•
10.	Specify:	16.	ş <u>0</u>
17.			-
ir.	17a. Car payments for Vehicle 1	17a.	§ 561
			\$_0
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	\$ <u>0</u> \$-0
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	ş <u>0</u>
19.	Other payments you make to support others who do not live with you.		
	Specify: Mother	19.	\$_150
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-	ə .	
	20a. Mortgages on other property	20a.	\$ <u>0</u>
	20h. Real estate taxes	20b.	\$ <u>0</u>
	20c. Property, homeowner's, or renter's insurance	20c.	ş <u>0</u>
	20d. Maintenance, repair, and upkeep expenses	20d.	\$_0
	20e. Homeowner's association or condominium dues	20e.	\$_0

Debtor	1	Kalani Jon	Middle Name	Sease Last Name		ase number (if known)	_
. Ot	her. S	Specify:				21.	+\$_0
. Ca	lculat	te your month	hly expenses.				
22	a. Add	l lines 4 throug	gh 21.			22a.	\$ <u>3326</u>
22	b. Cop	y line 22 (moi	nthly_expenses	for Debtor 2), if any, from Official	Form 106J-2	22b.	\$
22	c. Add	l line 22a and	22b. The result	is your monthly expenses.		22c .	\$
3. Cal	culate	your monthi	ly net income.				
23a	. Co	py line 12 (you	ur combined mo	onthly income) from Schedule I.		23a.	\$ <u>1390</u>
23b	. Co _l	py your month	nly expenses fro	m line 22c above.		23b.	_\$_3326
23c.			onthly expenses r monthly net in	from your monthly income.		23 c.	\$1936
For	exam rtgage	ple, do you ex	opect to finish p increase or decr	ase in your expenses within the aying for your car loan within the ease because of a modification to	year or do you expe	ct your nortgage?	
	Yes.	Explain he		nomenum and an area (and Prime North Anniel Marie North Annie Anni	The formal management of the formal management	romen ver a service en menerole en	no francisco com mano commono e com congruence mono congruence propagativo propagativo propagativo de la 2012 A
						The same of the sa	annamentan an antico comencial antico de la comencia del la comencia de la comencia de la comencia de la com

Debtor 1	Kalani	Jonathan	Sease
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Lest Name
United States	Bankruptcy Court fo	r the: WESTERN District of	WASHINGTON
Case number			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or Imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone who is NOT an at	torney to help you fill out bankruptcy forms?	
□ No		
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	:
	Signature (Official Form 119).	
Under penalty of perjury, I declare that I have read the s that they are true and correct.	ummary and schedules filed with this declaration and	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Signature of Debtor 1	Signature of Debtor 2	
Date 67 09 20/9	Date MM / DD / YYYY	:

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Debtor 1 Kalani				
	Jonathan	Sease		-
First Name	Middle Name	Last Name		
Spouse, if filing) First Name	Middle Name	Last Name WASHINGTON	r	
	for the: WESTERN District of	A MASHINGTON		
Case number(If known)				Check if this is an
				amended filing
				-
fficial Form 107	_			
tatement of Fi	inancial Affair	s for Indiv	iduals Filing for Bank	ruptcy 04/1
	s needed, attach a separa		g together, both are equally responsible m. On the top of any additional pages, v	
art 1: Give Details A	bout Your Marital Stat	us and Where Y	ou Lived Before	_
. What is your current ma	ırital status?			
Married				
Mot married				
	ces you lived in the last 3 ye			-
	and the second	lived there	Debtor 2:	Dates Debtor 2 lived there
	and the second	lived there	Debtor 2:	lived there
8545 Litt Dr Se	, 6,	lived there		lived there
8545 Litt Dr Se Number Street				lived there
		From 03/2018	Same as Debtor 1	lived there Same as Debtor 1 From
Number Street Lacey	985	From 03/2018 To 03/2019	Same as Debtor 1 Number Street	Same as Debtor 1 From To
Number Street		From 03/2018 To 03/2019	Same as Debtor 1 Number Street City State ZIP	Same as Debtor 1 From To
Number Street Lacey City	985	From 03/2018 To 03/2019	Same as Debtor 1 Number Street	Same as Debtor 1 From To
Lacey City 9176 Ruddy Dr	985	From 03/2018 To 03/2019	Same as Debtor 1 Number Street City State ZIP Same as Debtor 1	Same as Debtor 1 From To
Number Street Lacey City	985	From 03/2018 To 03/2019	Same as Debtor 1 Number Street City State ZIP	From To Same as Debtor 1
Lacey City 9176 Ruddy Dr	985 State ZIP Code	From 03/2018 To 03/2019 16 From 12/2014 To 03/2018	Same as Debtor 1 Number Street City State ZIP Same as Debtor 1	Same as Debtor 1 From To Code Same as Debtor 1
Lacey City 9176 Ruddy Dr Number Street	985	From 03/2018 To 03/2019 16 From 12/2014 To 03/2018	Number Street City State ZIP Same as Debtor 1 Number Street	Same as Debtor 1 From To Code Same as Debtor 1
Lacey City 9176 Ruddy Dr Number Street Fort Lewis City i. Within the last 8 years, a states and territories included	985 State ZIP Code 9843 State ZIP Code did you ever live with a sp	From 03/2018 To 03/2019 16 From 12/2014 To 03/2018 33 To 03/2018 To 03/2018 To 03/2018	Number Street City State ZIP Same as Debtor 1 Number Street City State Zip City State Zip Number Street	Same as Debtor 1 From To Code Same as Debtor 1 From To To To Territory? (Community property
Lacey City 9176 Ruddy Dr Number Street Fort Lewis City 1. Within the last 8 years, a states and territories included.	985 State ZIP Code 9843 State ZIP Code did you ever live with a spude Arizona, California, Idah	From 03/2018 To 03/2019 16 From 12/2014 To 03/2018 33 To 03/2018 To 03/2018 To 03/2018	Number Street City State ZIP Same as Debtor 1 Number Street City State Zip City State Zip Number Street	Same as Debtor From To Code Same as Debtor 1 From To IP Code territory? (Community property

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

	Sease lame Last Nar		Case nu	mber (# known)	
Did you have any income fill in the total amount of inc If you are filing a joint case a No	ome you received f	rom all jobs and all busir	esses, including part-ti		dar years?
		Debtor 1		Debtor 2	Tieres de la company
		Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions an exclusions)
From January 1 of cur the date you filed for t		Wages, commissions, bonuses, tips	\$ <u>14500</u>	Wages, commissions, bonuses, tips	\$_0
For last calendar year		☑ Operating a business☑ Wages, commissions, bonuses, tips☑ Operating a business	\$	☐ Operating a business ☐ Wages, commissions, bonuses, tips ☐ Operating a business	S_0
For the calendar year (January 1 to Decembe	before that:	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$_0
inemployment, and other pu	of whether that incom ublic benefit payme	me is taxable. Examples nts; pensions; rental inco	of other income are alime; interest; dividends	mony; child support; Social S ; money collected from laws red together, list it only once	uits: royalties; and
nclude income regardless o inemployment, and other pu gambling and lottery winning	of whether that incom ublic benefit payme gs. If you are filing a	me is taxable. Examples nts; pensions; rental inco a joint case and you have	of other income are aling one; interest; dividends income that you receive	; money collected from laws red together, list it only once	uits: royalties; and
nclude income regardless on nemployment, and other put ambling and lottery winning ist each source and the ground No	of whether that incom ublic benefit payme gs. If you are filing a	me is taxable. Examples nts; pensions; rental inco a joint case and you have	of other income are aling one; interest; dividends income that you receive	money collected from laws yed together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source
nclude income regardless of inemployment, and other payambling and lottery winning list each source and the grown of the g	of whether that incoublic benefit payme gs. If you are filing a pass income from ea	me is taxable. Examples nts; pensions; rental income joint case and you have the source separately. Do	of other income are alir ome; interest; dividends income that you receiv not include income that Gross income from each source (before deductions and	money collected from laws; red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source (before deductions ar
nclude income regardless on memployment, and other purambling and lottery winning ist each source and the grown No Yes. Fill in the details.	of whether that incoublic benefit payme gs. If you are filing a pass income from ea	me is taxable. Examples nts; pensions; rental income joint case and you have the source separately. Do	of other income are alir ome; interest; dividends income that you receiv not include income that Gross income from each source (before deductions and exclusions)	money collected from laws; red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source (before deductions at exclusions)
include income regardless of the income regardless of the income regardless of the income and other parambling and lottery winning ist each source and the growing is each source an	of whether that incombile benefit payme gs. If you are filing a coss income from each arrent year until bankruptcy:	me is taxable. Examples nts; pensions; rental income joint case and you have ch source separately. Do	of other income are alir me; interest; dividends income that you receiv not include income that Gross Income from each source (before deductions and exclusions) \$ 0 \$ \$	money collected from laws; red together, list it only once at you listed in line 4. Debtor 2. Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source (before deductions are exclusions) \$ 0 \$ \$ \$
nclude income regardless of nemployment, and other parambling and lottery winning list each source and the grown No Yes. Fill in the details.	of whether that incoublic benefit payme gs. If you are filing a coss income from eastern the service of the ser	me is taxable. Examples nts; pensions; rental income joint case and you have ch source separately. Do	of other income are alir me; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	money collected from laws; red together, list it only once at you listed in line 4. Debtor 2. Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source (before deductions are exclusions) \$ 0 \$ \$ \$
Include income regardless of an employment, and other pagambling and lottery winning list each source and the growing of the each source and the growing of the list. From January 1 of cuthe date you filed for for last calendar year.	of whether that incomplic benefit payme gs. If you are filing a poss income from eastern the second	me is taxable. Examples nts; pensions; rental income joint case and you have ch source separately. Do Deptors 18 18 18 18 18 18 18 18 18 18 18 18 18	of other income are alime; interest; dividends income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 0	money collected from laws; red together, list it only once at you listed in line 4. Debits 2 Sources of income Describe below.	uits; royalties; and under Debtor 1. Gross income from each source (before deductions are exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Kalani Jonathan	Sease	Case number (if (mown)	
			_

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

□ No. I	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."									
				-	ay any creditor a total of \$6	3,825* or more?				
[□ No. Go to line 7.									
(total amour	nt you paid ti	hat creditor. Do	not include p	\$6,425* or more in one or ayments for domestic suppends to an attorney for this	oort obligations, such as				
•			•		at for cases filed on or after					
🖸 Yes. 🛭	Debtor 1 or Debtor	2 or both h	ave primarily	consumer de	bts.					
					ay any creditor a total of \$6	600 or more?				
G	🗹 No. Go to line 7.									
[(creditor, Do	not include	payments for a	domestic supr	\$600 or more and the tota out obligations, such as ch ey for this bankruptcy case	ild support and				
				Dates of payment	Total amount paid	Àmount you still owe	Was this payment for.			
					\$	\$	☐ Mortgage			
	Creditor's Name						☐ Car			
	Number Street						Credit card			
							Loan repayment			
							Suppliers or vendor			
	City	State	ZIP Code			-	Other			
	ANTERCOCKER OF SET OF A MANAGEMENT			t talkallarnallarnannannannannannaya, yayan ayy	- 5-5 V > 5 last Analik dibah Albihik 2 V > 5-7 V 5 bak sahahandahandan adamas samas samas aks	g yaga yagamaman na guur a saman a ay agamamada anu a a a baddagaaga an agamard daran bur blam	Bennangsungungungungga narkerunda v.s. 2 frá Laskabak sulvansi öde. Vá ölésők 7 kölösső k			
	Creditor's Name				\$	\$	Mortgage			
							☐ Car			
	Number Street						☐ Credit card			
							Loan repayment			
							Suppliers or vendor			
		State	ZIP Code			-	Other			
	City						led VIII de glat be en alle deprenonalismon company angular e e e e e e e e e e e e e e e e e e e			
	City	3.25.29.30.49.53.25.25.25.26.26.26.25.25.20.20.25.25.25.25.25.25.25.25.25.25.25.25.25.	enterny ran retainmenterment Audit ret I attent I	0 000 600 0		Milled Mills and I. The Band of the Analysis A.				
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	Creditor's Name	A. 2 C. 22 - 24 - 27 C. 2 C	enantana ayu amuunuunun qaaga ay qagaya		\$	\$	☐ Mortgage			
	Commence of the second of the second	A.P.A.D. MARTINI, P.S.A. A.P.A. Martini (September 1900).			\$	\$				
	Creditor's Name	A A A ST AND THE A PLAN A PLAN A STANDARD PLAN A PLAN A STANDARD PLAN A PLAN A PLAN A STANDARD PLAN A PLAN A P			\$	\$	☐ Car			
	Creditor's Name	AAA BARRAAA AAAAAAA			\$	\$	Car			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Kalani Jonathan	Sease			Case number (if known)	
	First Name Middle Name	Last Name				
<i>iders</i> pora ent, ì	itions of which you are an o	general partners; n fficer, director, pers s you operate as a s	elatives of any on in control, or	general partners; p r owner of 20% or n	artnerships of whic nore of their voting	who was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
No	•					
Yes	. List all payments to an ins	ider.				
,			Dates of payment	Total amount	Amount you still	Reason for this payment
			•	P		
Ins	sider's Name			\$	\$ <u>_</u>	: : :
Nu	mber Street	· · · · · · · · · · · · · · · · · · ·				
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Cit	y	State ZIP Code	of below to found, on youngsty agont agont a company as an an	HAN 1937 (1936) 13 - 1715	ionanananananananananananananananananana	\$1
				œ	\$:
Ins	sider's Name			.	φ	
Nh	Imber Street					•
140	MINDS CHARL					· · ·
_		<u> </u>				
City		State 710 Code				
СIĘ	iy .	State ZIP Code				
n insid nclude No	der? payments on debts guaran	teed or cosigned by		ayments or trans	er any property o	n account of a debt that benefited
res	. List all payments that ben	ented an insider.				,
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			,		,	ov 1944 (18-5) (18-4) (18-4) state trobet i komme om en men he himos kom finlanden propegansjen seg en se pro- T
Ins	sider's Name			\$	\$	
Nu	mber Street					
City	y	State ZIP Code				
***************************************	T. A.	* CAUSE ANNAULA LA PROPRIATA	THE STATE OF THE S	-	- 2000 Medicalelicatory (1997) 1990 (193	
Insi	ider's Name			\$. \$	
-195						
Nu	mber Street					
_						
Cin	v	State ZIP Code				

Kalani Jonathan	Seasè	Case number (if known)
First Name Middle Name	Lost Nome	· · · · · · · · · · · · · · · · · · ·

contract disputes.			vsuit, court action, or a vorces, collection suits, p		
No					
Yes. Fill in the details.				ing part of the same	Marian Trade and
	Nature c	f the case	Court or agency		Status of the case
Case title			Court Name		— Pending
					On appeal
			Number Street		Concluded
Case number			City	State ZIP Code	_
TO A STATE OF THE	***************************************				
Case title			Court Name	-	— Pending
					On appeal
Casa sussahan			Number Street		Concluded
Case number			City	State ZIP Code	_
No. Go to line 11. Yes. Fill in the information below	<i>1</i> .	Describe the property		· Date	Value of the property
Yes. Fill in the information below		Describe the property		Date Statement in Assistance	Value of the property
		Describe the property		Data (3)	(Value of the property
es. Fill in the information below		Describe the property	umuma varia da semilika da	Date	Value of the property \$
res. Fill in the information below	·	Explain what happen	ed possessed.	Date -	Value of the property
Yes. Fill in the information below		Explain what happen Property was re Property was fo	ed possessed.	Data (Value of the property
Yes. Fill in the information below Creditor's Name Number Street	tate ZIP Code	Explain what happen Property was for Property was go	ed possessed.		** Value of the property ***********************************
Yes. Fill in the information below Creditor's Name Number Street		Explain what happen Property was for Property was go	epossessed. preclosed. arnished. ttached, seized, or levied	Date	S. S. Werder Commissions S. S
Yes. Fill in the information below Creditor's Name Number Street		Explain what happen Property was re Property was fo Property was g Property was a	ed epossessed, preclosed. arnished. ttached, seized, or levied	Date	S
Yes. Fill in the information below Creditor's Name Number Street		Explain what happen Property was re Property was fo Property was g Property was a	ed epossessed, preclosed. arnished. ttached, seized, or levied	Date	S
Yes. Fill in the information below Creditor's Name Number Street City St		Explain what happen Property was re Property was fe Property was g Property was a Describe the property	epossessed. preclosed. arnished. ttached, seized, or levied	Date	Value of the proper
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Yes. Fill in the information below Creditor's Name Number Street City St		Explain what happen Property was for Property was good Property was a Property was a Describe the property	ed epossessed. preclosed. armished. ttached, seized, or levied	Date	Value of the property S
Yes. Fill in the information below Creditor's Name Number Street City St Creditor's Name Number Street		Explain what happen Property was re Property was g Property was a Property was a Describe the property Explain what happen Property was re Property was re Property was g	ed epossessed. preclosed. amished. ttached, seized, or levied epossessed. preclosed.	Date Sog. 1	Value of the proper

Statement of Financial Affairs for Individuals Filling for Bankruptcy

	uptcy, did any <mark>credito</mark> r, in		ncial institutio	n, set off any a	mounts from you
counts or refuse to make a payment be	ecause you owed a debt?				
No					
Yes. Fill in the details.				. ,	
	Describe the action the	creditor took		Date action	Amount
Creditor's Name				was taken	
Number Street	_				\$
	Lector and an annual least an				
City State ZIP Code	Last 4 digits of accoun	t number: XXXX			
thin 1 year before you filed for bankru	otcy, was any of your proj	perty in the possession	of an assign	ee for the benef	it of
editors, a court-appointed receiver, a c			· or an accign	00 101 110 0010	
No	•				
Yes -					
List Certain Gifts and Contrib	utions				
			•		
Gifts with a total value of more than \$600 per person	<u>.</u>			Dates you gave the gifts	Value
Gifts with a total value of more than \$600	Describe the gifts			Dates you gave the gifts	Value
Gifts with a total value of more than \$600	Describe the gifts			Dates you gave the gifts	Value \$
Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave the gifts	Value \$
Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave the gifts	Value \$ \$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts			Dates you gave the gifts	Value \$
Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave the gifts	Value \$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts			Dates you gave the gifts	Value \$
City State ZIP Code	Describe the gifts			Dates you gave the gifts	Value \$\$
Person to Whom You Gave the Gift Number Street	Describe the gifts			Dates you gave the gifts	Value \$
Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts			Dates you gave the gifts	Value \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts			Dates you gave	\$\$

ithin 2 years before you filed for bankru	iptcy, did you give any gifts or contributions with a total val	ue of more than \$600 to any charity?
3 No		
Yes. Fill in the details for each gift or co	ntribution.	•
· · · · · · · · · · · · · · · · · · ·	Sign of the second second	
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you Value
	gis 1 × 10×10 minimiza ana aminimiza ana ana ana ana ana ana ana ana ana a	we will die the territory
	**	
Charity's Name		<u></u> \$
Chanty's Ivanie	#	
		<u> </u>
	5 to 10 to 1	
Number Street	- H	-
Number Street	•	* The state of the
		-
City State ZIP Code	- į	
	***ONLY CONTROL AND THE STREET OF THE STREET	nuy f
6: List Certain Losses		
		<u> </u>
minimum and the second of the	ا د منظ تسیط ^ی طبی ہے ۔ ۔ ۔ ۔ ا	
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your Value of property loss
Describe the property you lost and how the loss occurred	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	lose lost
Describe the property you lost and how the loss occurred	Include the amount that insurance has paid, List pending insurance	lose lost
Describe the property you lost and how the loss occurred	Include the amount that insurance has paid, List pending insurance	lose lost
Describe the property you lost and how the loss occurred	Include the amount that insurance has paid, List pending insurance	lose lost
Describe the property you lost and how the loss occurred	Include the amount that insurance has paid, List pending insurance	lose lost
how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly.	lose lost
how the loss occurred 76 List Certain Payments or Train	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	1038 1000
7: List Certain Payments or Trail/lithin 1 year before you filed for bankruj	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly. Insters ptcy, did you or anyone else acting on your behalf pay or tra	1038 1000
how the loss occurred 7: List Certain Payments or Train 7: Ithin 1 year before you filed for bankrupou consulted about seeking bankruptcy	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly. Insters ptcy, did you or anyone else acting on your behalf pay or tra	\$sunsfer any property to anyone
To List Certain Payments or Train Type of the consulted about seeking bankruptcy include any attorneys, bankruptcy petition p	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly. Insters otcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition?	\$sunsfer any property to anyone
how the loss occurred 7: List Certain Payments or Train 7: It is the control of	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly. Insters otcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition?	\$ sinsfer any property to anyone
how the loss occurred 7: List Certain Payments or Train 7 Ithin 1 year before you filed for bankrup 8 ou consulted about seeking bankruptcy 9 include any attorneys, bankruptcy petition p	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: mafers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your pending and property or preparers.	Insfer any property to anyone your bankruptcy.
how the loss occurred 7: List Certain Payments or Train 7 Ithin 1 year before you filed for bankrup 8 ou consulted about seeking bankruptcy 9 include any attorneys, bankruptcy petition p	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Properly. Insters otcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition?	s sinsfer any property to anyone your bankruptcy.
how the loss occurred 7: List Certain Payments or Train 7: It is the control of	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: mafers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services required in your behalf pay or t	Insfer any property to anyone your bankruptcy.
7: List Certain Payments or Trainfithin 1 year before you filed for bankrup ou consulted about seeking bankruptcy include any attorneys, bankruptcy petition process. Fill in the details.	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: nsfers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services agencie	s sinsfer any property to anyone your bankruptcy.
List Certain Payments or Trainfilm 1 year before you filed for bankruptcy ou consulted about seeking bankruptcy neclude any attorneys, bankruptcy petition process. Fill in the details.	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: nsfers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services agencie	s sinsfer any property to anyone your bankruptcy.
7: List Certain Payments or Trail //thin 1 year before you filed for bankrup ou consulted about seeking bankruptcy clude any attorneys, bankruptcy petition p No Yes. Fill in the details. Person Who Was Paid	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: nsfers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services agencie	s sinsfer any property to anyone your bankruptcy.
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T: List Certain Payments or Trainfill In 1 year before you filed for bankruptcy actude any attorneys, bankruptcy petition policy of the payment of the payme	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: nsfers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services agencie	s sinsfer any property to anyone your bankruptcy.
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how the loss occurred Train Payments or Train Vithin 1 year before you filed for bankruptcy ou consulted about seeking bankruptcy nelude any attorneys, bankruptcy petition payments. Fill in the details. Person Who Was Paid Number Street	Include the amount that insurance has paid, List pending insurance claims on line 33 of Schedule A/B: Property: nsfers ptcy, did you or anyone else acting on your behalf pay or training or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or training agencies for services agencie	s sinsfer any property to anyone your bankruptcy.

Person Who Made the Payment, if Not You

Statement of Financial Affairs for Individuals Filing for Bankruptcy

First Name Middle Name Last	Name	Case number (if known)		
	Description and value of any property trains		late payment or ransfer was made	Amount of paymerit
Person Who Was Paid	A TAMERIA OF THE CONTROL OF THE CONT	10 m m m m m m m m m m m m m m m m m m m		
				\$
Number Street		THE CONTRACTOR OF THE CONTRACT		\$
		260 (000)		-
City State ZIP Code		n de distriction de la constant de l		
Email or website address		MATERIAL AND		
Person Who Made the Payment, if Not You				
No Yes. Fill in the details.		\$\$ * , y , , ,		,
	Description and value of any property tra	ા કો ફોક્સોમાં કરે 🐧 🖠	late payment or ransfer was	Amount of paym
Person Who Was Paid	· Control of the cont		nade `	* .*
Number Street	-	-	<u></u>	\$
		-		\$
City State ZIP Code	Dtcv. did you sell. trade, or otherwise tra	insfer any property to a	invone other tha	\$
City State ZIP Code Ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you ha No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a		gage on your pro	perty).
ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property	security interest or mon	gage on your pro	perty). Date transfe
ithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you han long. Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property	security interest or mor Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe
Ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you hand to have a second or the second of t	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property transferred.	Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe
ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you han No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property transferred.	security interest or mor Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe
ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you hat No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property transferred.	Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe
ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you hat No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property transferred.	Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe
Ithin 2 years before you filed for bankrul ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you hat No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting of a ve already listed on this statement. Description and value of property transferred.	Describe any property or or debts paid in exchange	gage on your pro	perty). Date transfe

Statement of Financial Affairs for Individuals Filing for Bankruptcy

btor 1	Kalani Jonathan First Name Middle Name	Sease Last Name	Case number (Irknow	m)	
are a	beneficiary? (These are often ca	ankruptcy, did you transfer any proper lled asset-protection devices.)	ty to a self-settled trust	- t or similar device of w	/hich you
		Description and value of the prope	•		Date transfer was made
Na	lame of trust				
art 8:	List Certain Financial Acc	ounts, Instruments, Safe Deposit	Boxes, and Storage		/m results
close Include broke	ed, sold, moved, or transferred? de checking, savings, money ma erage houses, pension funds, co	kruptcy, were any financial accounts or arket, or other financial accounts; certle operatives, associations, and other fire	ficates of deposit; share ancial institutions.	res in banks, credit un	ions,
		Last 4 digits of account number	Type of account or Instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
ī	Name of Financial Institution	——			
		xxxx	Checking		\$
-	Number Street City State ZIP Co		Savings Money market Brokerage	-	\$
.		de	Savings Money market Brokerage Other	-	\$
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Statement of Financial Affairs for Individuals Filing for Bankruptcy

ZIP Code

City

ZIP Code

State

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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City

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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ited States	Bankruptcy Court for the:	WESTERN District of	WASHINGTON
number			

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Information below.	Resort Press . African 1994 al 170m	
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Capital One Auto Finance	Surrender the property.	No
Description of	Retain the property and redeem it.	√ res
pesciping of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
2018 Chevrolette Malibu		
Creditor's name:	Surrender the property.	No
14 Adda was an distribution and an anti-control of the state of the st	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	
Creditor's	Surrender the property.	No
name: A supremission of the proposition of the first of the proposition of the supremission of the supremission of the supremise of the supr	Retain the property and redeem it.	Yes
Description of roperty ecuring debt:	Retain the property and enter into a Reaffirmation Agreement.	
,	Retain the property and [explain]:	
Creditor's	Surrender the property.	No
NAME: 1900-marketalandalandan 25-marketalanda 25-marketalanda marketalanda marketalanda marketalanda marketalanda mar	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a	
securing debt:	Reaffirmation Agreement.	
	Retain the property and [explain]:	

Official Form 108

Debtor	1

Kalani Jonathan	Sease	Case number (# known)
First Name Middle Name	Lest Name	

		-			
Part 2:	List Your U	nexpired	Personal	Property	Leases

escribe your unexpired personal property leases	Will the lease be assumed?
ssor's name:	□ No
scription of leased	PP-74 (* 1 . m. blands entercompage(PPR) (communicate) is a PP-75° absumble of PP-74 (PP-84) (communicate) in the property of PP-84 (PP-84) (communicate) in the prope
ssor's name:	□No
scription of leased perty:	**************************************
ssor's name:	The second secon
scription of leased operty:	[Yes
ssor's name:	□ No
scription of leased operty:	**************************************
ssor's name:	□No
escription of leased operty:	Y COLUMN TO A MARCHANIA CONTRACTOR OF THE COLUMN TO THE CO
ssor's name:	No.
scription of leased operty:	18 http://www.ah.Quademontscopedia.com/dabard Christopy Christophysiology 20
ssor's name:	
scription of leased operty:	Yes
Sign Below	
ler penalty of perjury, I declare that I have indicated my inter sonal property that is subject to an unexpired lease.	ntion about any property of my estate that secures a debt and any
4	

United States Bankruptcy Court WESTERN District Of WASHINGTON

IN RE.	Sease, Kalani	
	Debtor(s).	Case No
		s) hereby verify that the attached list of creditors is true knowledge and that it corresponds to the creditors listed
	ur schedules.	knowledge and that it corresponds to the elections have
Date: _(07/09/19	Debtor
		Joint Debtor

Bull City Financial Solutions 2609 N. Duke St. Ste 500 Durham NC 27704

Capital One Auto Finance Credit Bureau Dispute Po Box 259407 Plano TX 75025

Credit One Bank 6801 S. Cimarron Road Las Vegas NV 89113

Finwise/opploans 626 Rxr Plaza Suite 600 Uniondale NY 11553

Harris Originals 800 Prime Place Hauppauge NY 11788

Iq Data International In 1010 Se Everett Mall Way 100 Everett WA 98208

Military Star 3911 S Walton Walker Blvd Dallas TX 75265-0410

Navy Federal Cu One Security Place Merrifield VA 22119 Sunrise Credit Services 234 Airport Plaza Blvd Ste 4 Farmingdale NY 11735

Tbom - Milestone 216 W 2nds St Dixon MO 65459